FORM D

MAR 1 9 2007

UNITED STATES SECURÍTIÉS AND EXCHANGE COMMISSION Washington, D.C. 20549

ORIGINAL

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number:

Expires:

3235-0076 April 30, 2008

Estimated average burden

hours per response 16.00



Name of Offering (☐ check if this i	s an amendment and name	has changed, and indica	ite change.)		
AEI 2007 Venture Investments II,	LLC / Offering of Investo	r Member Interests			·
Filing Under (Check box(es) that ap		☐ Rule 505	Rule 506	☐ Section 4(6)	□ ULOE
Type of Filing:  New Filing	☐ Amendment				
		BASIC IDENTIFICA	TION DATA		
1. Enter the information requested a					
Name of Issuer (☐ check if the	is is an amendment and nar	me has changed, and in	dicate change.)		
AEI 2007 Venture Investments II	LLC				
Address of Executive Offices	(	Number and Street, Cit	y, State, Zip Code)	Telephone Number (Incl	uding Area Code)
311 South Wacker Drive, Suite 1	650, Chicago, IL 60606			312-377-5300	·
Address of Principal Business Ope		Number and Street, Cit	y, State, Zip Code)	Telephone Number (Incl	uding Area Code)
(if different from Executive Office	Same			Same	
Investment in securities of private	ly held technology comp	any.			
Type of Business Organization	_		_		OFCCED
☐ corporation	•	ship, already formed	Other (pleas	• • • • • • • • • • • • • • • • • • • •	<b>PROCESSED</b>
☐ business trust	☐ limited partners	ship, to be formed	Lin	nited liability company	
Actual or Estimated Date of Incorpor Jurisdiction of Incorporation or Orga	ation or Organization: 1	onth Year  1 0 6  S. Postal Service abbreada; FN for other foreign		□ Estimated  D E	EMAR 2 7 2007 THOMSON FINANCIAL
CENEDAL INCTRICTIONS	•				

# GENERAL INSTRUCTIONS

# Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

**ATTENTION** 

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

### A. BASIC IDENTIFICATION DATA

# 2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		ł
Full Name (Last name first, if	`individual)					
Advanced Equities Venture Business or Residence Address						
311 South Wacker Drive, Su	uite 1650 Chicago	11 60606				
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ Managing Member	
Full Name (Last name first, if	`individual)					
The Debra Jean Hoskins Tr						1,
Business or Residence Addres	ss (Number and Stre	et, City, State, Zip Code)				
6432 Verona Rd., Mission H	lills, KS 66208					ĺ
Check Box(es) that Apply:	☐ Promoter	☐Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or  Managing Partner	: : :
Full Name (Last name first, if	individual)					
Business or Residence Addres	ss (Number and Stre	eet, City, State, Zip Code)				
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or	16 54
Full Name (Last name first, if					Managing Partner	
run vane (cast name mst, n	morvidual)					•
Business or Residence Addres	ss (Number and Stre	et, City, State, Zip Code)				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or	* : :
Full Name (Last name first, if	individual)	···		· · · · · · · · · · · · · · · · · · ·	Managing Partner	
Business or Residence Addres	s (Number and Stre	et, City, State, Zip Code)				à
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or	<u> </u>
Full Name (Last name first, if	individual)				Managing Partner	
Business or Residence Addres	Alumbar and Stra	at City State Tin Code)				
Duamess of Residence Addres	2 (vannoet sna 2016	et, City, State, Zip Code)				
	(Ü:	se blank sheet, or copy and us	e additional copies of this shee	t, as necessary.)		Я

				В	. INFORMA	TION ABO	<u>UT OFFERI</u>	NG			V.	<u> </u>
l. Has ti	he issuer sold	or does the	issuer inten	ıd to sell to	non-accredi	ted investor	s in this offi	rine?			Yes	No ″ ⊠
1. 11000	ne issuer soru	, or does are						-	***************************************	•••••		<u>_</u>
2 W/hat	ic the minim	um invectm				•	_				. \$	(1)
Z. Wildi	12 mic minimi	um mvesum	ciit tiiat wiii	be accepted	і пошапу п	iuividuai?				•••••		
3 Does	the offering r	vermit ioint	ownership o	fa sinole u	nit?						Yes ⊠	No □
			_	_		ill be naid o	vraiven dir	ectly or indi	rectly any o	ammiecian		_
or sin	nilar remuner	ation for so	licitation of	purchasers	in connection	n with sales	of securities	es in the offe	ering. If a n	erson to be		
	Residence Address (Number and Street, City, State, Zip Code)  Wacker Drive, Suite 1650, Chicago, IL 60606  ssociated Broker or Dealer											
						are associate	ed persons o	of such a bro	ker or deale	er, you may		
set fo	rth the inform	nation for the	at broker or	dealer only.								
Full Name	(Last name firs	t. if individua	<u>al)</u>									
	(	.,	_,					•				
Metz, Will												
Business o	r Residence Ad	dress (Numb	er and Street,	City, State, Z	ip Code)							
311 South	Wacker Drive	Suite 1650	Chicago II	<b>ፈ</b> ስፈብረ								
			Cincago	00000								.1
												*
Advanced	Equities, Inc.			<del> </del>		<u>-</u>						
					urchasers							
,			,									All States
[AL] [IL]											[HI] [MS]	[ID] [MO];
[MT]											[OR]	[PA]
[RI]	[SC]	[SD]									[WY]	[PR]
Full Name	(Last name firs	t, if individua	ıl)			•						
	`	•	•									•
Rusiness or	Residence Ad	dress (Numbe	er and Street	City State 7	in Code)			<u>.</u> .				
Dasiness of	regioence / id	wess (rumo	u ald succe,	eny, state, z	np code)							
Nome of A	granieted Dark	or or Doolor										
Name of A	SSOCIALEU DIOK	er or Dealer										
States in W	hich Person Li	sted Has Soli	cited or Intend	is to Solicit F	urchasers			<del></del>				
(AL)			•		[CO]	[CT]	(DE)	[DC]	(FL)	[GA]	[HI]	[ID]
$(\mathbb{L})$				[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [R]]											[OR] [WY]	[PA] [PR] :
[10]	[5C]	լա	נייין	·	[01]	[41]	[VA]	[WA]	[** *]	[177]	[ ** 1 ]	[i Kj
Full Name	(Last name firs	t, if individua	ŋ)									
Business or	Residence Ad	dress (Numbe	er and Street.	City, State, Z	in Code)				····			
			· · · · · · · · · · · · · · · · · · ·	,,,								
Name of A	ssociated Broke	er or Dealer				<del></del>						•
												•
	hich Person Lis				urchasers							
	All States" or cl	neck individu	al States)		***************************************		,					□ All States
(AL) [IL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H]]	
[IL] [MT]	[IN] [NE]	[lA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

<sup>(1)</sup> The minimum capital contribution is \$106,000, although the Managing Members may accept contributions of any amount in their sole discretion.

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0 if answer is "none" or "zero." If the transaction is an exchange offering, check this box □ and indicate in the transaction is an exchange offering.	)" .e			
	columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggreg Offering		Α	mount Already Sold
	Debt	\$		\$	
	Equity	<u>*</u>		s	
	□ Common □ Preferred	<b>\$</b>		⊅	
		•		•	
	Convertible Securities (including Warrants)	\$	<del></del>	\$	
	Partnership Interests	<b>3</b>		\$	
	Other (Specify Investor Member Interests)	\$_53,000,000			0,000
	Total	\$_53,000,000		\$ <u>20</u>	0,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer "none" or "zero."	e			
			Number Investors		Aggregate Dollar Amount Of Purchases
	Accredited Investors		2	S_	200,000
	Non-accredited Investors		-0-	\$_	-0-
	Total (for filings under Rule 504 only)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	N/A	\$_	N/A
3.	Answer also in Appendix, Column 4, if filling under ULOE.  If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by th issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in the offering. Classify securities by type listed in Part C - Question 1.				
	Carried by type inter in the Question 1.	Τ	ype of		Dollar Amount
	Type of offering		ecurity		Sold
	Rule 505	,	N/A	\$	N/A
	Regulation A		N/A	\$_ \$	
	Rule 504				
			N/A	\$_	
	Total	<u>i</u>	<u> </u>	\$_	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in thi offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given a subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the bo to the left of the estimate.	S			
	Transfer Agent's Fees			3	<b>\$</b>
	Printing and Engraving Costs		6	3	\$ 15,000
	Legal Fees	***************************************			\$ 10,000
	Accounting Fees.				\$
	Engineering Fees				\$
	Sales Commissions (specify finders' fees separately)				\$ 10,000
	Other Expenses (identify) Finder's Fees				\$ 9,500
	Total				\$ <u>44,500</u>
		••••••		-	<u> </u>

	the "adjusted gross proceeds to the issuer."		••••		S <u>.5</u>	52,955,500
•	Indicate below the amount of the adjusted gross proceused for each of the purposes shown. If the amount estimate and check the box to the left of the estimate. The adjusted gross proceeds to the issuer set forth in response	or any purpose is not known, fur he total of the payments listed mu	rni Ist	sh an equal		
				Payments to Officers, Directors & Affiliates		Payments to Others
	Salaries and Fees		)	\$		\$
	Purchase of real estate		l	<b>\$</b>		\$
	Purchase, rental or leasing and installation of machinery and equi			\$		\$
	Construction or lease of plant buildings and facilities		ı	<b>\$</b>	_ 🗆	\$
	Acquisition of other businesses (including the value of securities offering that may be used in exchange for the assets or securities issuer pursuant to a merger)	of another				
			)	<b>\$</b>		\$
	Repayment of indebtedness		)	<b>\$</b>	_ 🛮	\$
	Working capital		ł	\$	_ 🗆	\$
	Other (specify) Purchase of investment securities				⊠	\$_200,000
			ı	\$		\$
	Column Totals	,	)	\$	×	\$ 200,000
	Total Payments Listed (column totals added)			⊠ \$	200,000	
	D. F	EDERAL SIGNATURE				
ntaki	or has duly caused this notice to be signed by the undersigned duly ng by the issuer to furnish to the U.S. Securities and Exchange Cod investor pursuant to paragraph (b)(2) of Rule 502.	authorized person. If this notice is formmission, upon written request of its	ilec s st	I under Rule 505, the aff, the information	e following furnished	g signature constitutes by the issuer to any n
uer (	Print or Type)	Signature //		$\overline{}$		Dage
I 20	07 Venture Investments II, LLC	/SAlm > Ho	0	d		3/14/200
	of Signer (Print or Type)	Title of Signer (Frint or Type)	_			121.11
		ı				

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

(2) Calculated based on the maximum aggregate offering amount.

**ATTENTION** 

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE	
1.	Is any party described in 17 CFR 230.262 presen of such rule?	atly subject to any of the disqualification provisions	Yes No □ ⊠ (3)
		See Appendix, Column 5, for state response.	
2.	The undersigned issuer hereby undertakes to furr 239.500) at such times as required by state law.	nish to any state administrator of any state in which this notice is	filed, a notice on Form D (17 CFR
3.	The undersigned issuer hereby undertakes to furn	nish to the state administrators, upon written request, information	furnished by the issuer to offerees.
I.		is familiar with the conditions that must be satisfied to be entitle tice is filed and understands that the issuer claiming the availability tisfied.	
	issuer has ready this notification and knows the coorized person.	contents to be true and has duly caused this notice to be signed on	its behalf by the undersigned duly
		PRESENTATIONS ARE PROVIDED AND SHALL BE ENFORCINGS AND REPRESENTATIONS ARE REQUIRED TO BE MADENT ACT OF 1996.	
İs	suer (Print or Type)	Signature, /	Date
A	EI 2007 Venture Investments II, LLC	allers & bood	3/14/200
N	ame of Signer (Print or Type)	Tizle of Signer (Print or Type)	
	ffrey S. Hood	Associate Secretary of the Managing Member	

(3) Not applicable for Rule 506 offerings.

# Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	:	2 ·	3	4					5
	to non-a	d to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount p	of investor and ourchased in State rt C-Item 2)		under Sta (if yes explan waiver	ification ate ULOE, attach attion of granted) (4)
State	Yes	No	LLC Membership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL				, .					
AK							<del> </del>		
AZ							•		
AR			10.00						
CA									ી યુ
СО									
СТ									
DE									
DC		= =							
FL							<b></b>		i.
GA									-
н									
ID									
IL Di									
IN IA									41
KS			\$53,000,000	1	\$200,000	0	0		X
KY									
LA									
МЕ									
MD			<del></del>						
МА									
МІ									
MN									
MS									
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1 2 3 4 5												
1	Intende to non-a investor	ed to sell accredited as in State a-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type o amount p (Par	Disqual under St (if yes explan waiver	lification state ULOE state attach attion of granted tem 1) (4)					
State	Yes	No .	LLC Membership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
MT												
NE			_					:	<del></del>			
NV												
NH			,				<del> </del>		1			
NJ									1			
NM									-			
NY												
NC												
ND		1										
ОН	·		<del></del>									
ОК									,			
OR			···					Ì				
PA									1			
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TN									ì			
TX									West car			
UT									1			
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VA									1			
WA									4 <b>el</b> a			
wv												
WI												
WY												
PR									1			
Foreign Investors												

